



# State of Louisiana

## Statement of Organization

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### FORM 200. STATEMENT OF ORGANIZATION

Committee: LA Nurse Practitioners PAC (NPPAC)^^^

Date filed:  
01/01/2006

#### STATEMENT OF ORGANIZATION

1. Name and Address of Committee

2. Date of this Statement  
01/01/2006Rec 5778  
#1065

LA Nurse Practitioners PAC (NPPAC)^^^

1200 South Acadian Thruway  
Suite 206

Baton Rouge, Louisiana 70806-4112

Check if new committee

3. Estimated Membership  
0

4. Amended Statement?

Yes X No

5. All Committees Officers (including Chairperson, Treasurer, if any, and any other committee officers and directors)

Position Name Address

Chairperson

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administers or financially supports this committee.)

Name Address Relationship to Committee

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions)

Name Address

8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:

a. Check one: Principal Campaign Committee Subsidiary Committee

b. Name of Candidate

c. Office Sought by the Candidate

9. Name of Person Preparing Report: Daytime Telephone:

10. WE HEREBY CERTIFY, that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.

This 1st day of January, 2006.

Yolanda Robertson

Signature of Committee Chairperson

(225) 763-2644

Daytime Telephone Number

Sophia Burgess

Signature of Committee Treasurer, if any

Daytime Telephone Number

**COMMITTEES WITH OVER 250 MEMBERS**

\*\*\* No certification was filed. \*\*\*



Generated Tue Jan 3 10:00:36 2006